

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		18	6/8/01
FORMALITY REVIEW	SA	555	7/23/01
RESPONSE FORMALITY REVIEW	HA	352	9/14/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	9/23/01
2	✓	✓	9/23/01
3	✓	✓	9/23/01
4	N	N	
5	N	N	
6	N	N	✓
7	N	N	✓
8	N	N	
9	✓	✓	9/23/01
10	✓	✓	9/23/01
11	✓	✓	9/23/01
12	✓	✓	9/23/01
13	✓	✓	9/23/01
14	✓	✓	9/23/01
15	✓	✓	9/23/01
16	✓	✓	9/23/01
17	✓	✓	9/23/01
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Claim	Final	Original	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions.
staple additional sheet here

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- 530
23-01